

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-1563	Issue Date: APR - 1 2002	CBL: 045 B034010
-----------------------	-----------------------------	---------------------

Location of Construction: 96 Park St	Owner Name: Norris Robert E &	Owner Address: 306 Deland Park Portland	Phone: 207-741-2066
Business Name: n/a	Contractor Name: n/a	Contractor Address: Portland	Phone:
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: Alterations - Multi Family	Zone:

Past Use: Multi Family / 4 units	Proposed Use: single family, applicant is aware that the rights to a four family are surrendered. <i>legal use = 4 DU per municipality Assess</i>	Permit Fee:	Cost of Work: \$20,000.00	CEO District: 2
Proposed Project Description: Build Elevator		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R-3</i> Type: <i>5B</i>	
		Signature:	Signature: <i>[Signature]</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.):				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: gg	Date Applied For: 12/28/2001	Zoning Approval		
-------------------------------	--	------------------------	--	--

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>OK 1/3/02</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
--	--	---	---

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

 SIGNATURE OF APPLICANT ADDRESS DATE PHONE

 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE

259

5/21/02 - Checked Framing & electrical for elevator
w/ Mike Collins - Framing OK - Electrical OK - OK
to proceed. Tom M

12-4-02
Elevator track is in
win, done structurally
done wiring for car &
doors
Tom M

All Purpose Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>96 PARK STREET</u>		
Total Square Footage of Proposed Structure <u>- 0 - NO EXPANSION</u>	Square Footage of Lot <u>26850 SQ FEET</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>045</u> Block# <u>34</u> Lot# <u>45B10</u>	Owner: <u>ROBERT & MAUREEN NORRIS</u>	Telephone: <u>741-2066</u>
Lessee/Buyer's Name (If Applicable) <u>045 B 034.010</u>	Applicant name, address & telephone:	Cost Of Work: \$ <u>20,000.00</u> Fee: \$ <u>144.00</u>
Current use: <u>HOME 4 UNITS</u>		
If the location is currently vacant, what was prior use: <u>HOME 4 UNITS</u>		
Approximately how long has it been vacant: <u>NOT APPLICABLE</u>		
Proposed use: <u>HOME 4 UNITS</u>		
Project description: <u>ELEVATOR</u>		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>MAUREEN COYNE NORRIS</u>		
Mailing address: <u>306 PARK ST DELINO PARK xx mail</u> <u>CAPE ELIZABETH ME 04107</u>		Phone: <u>741-2066</u>

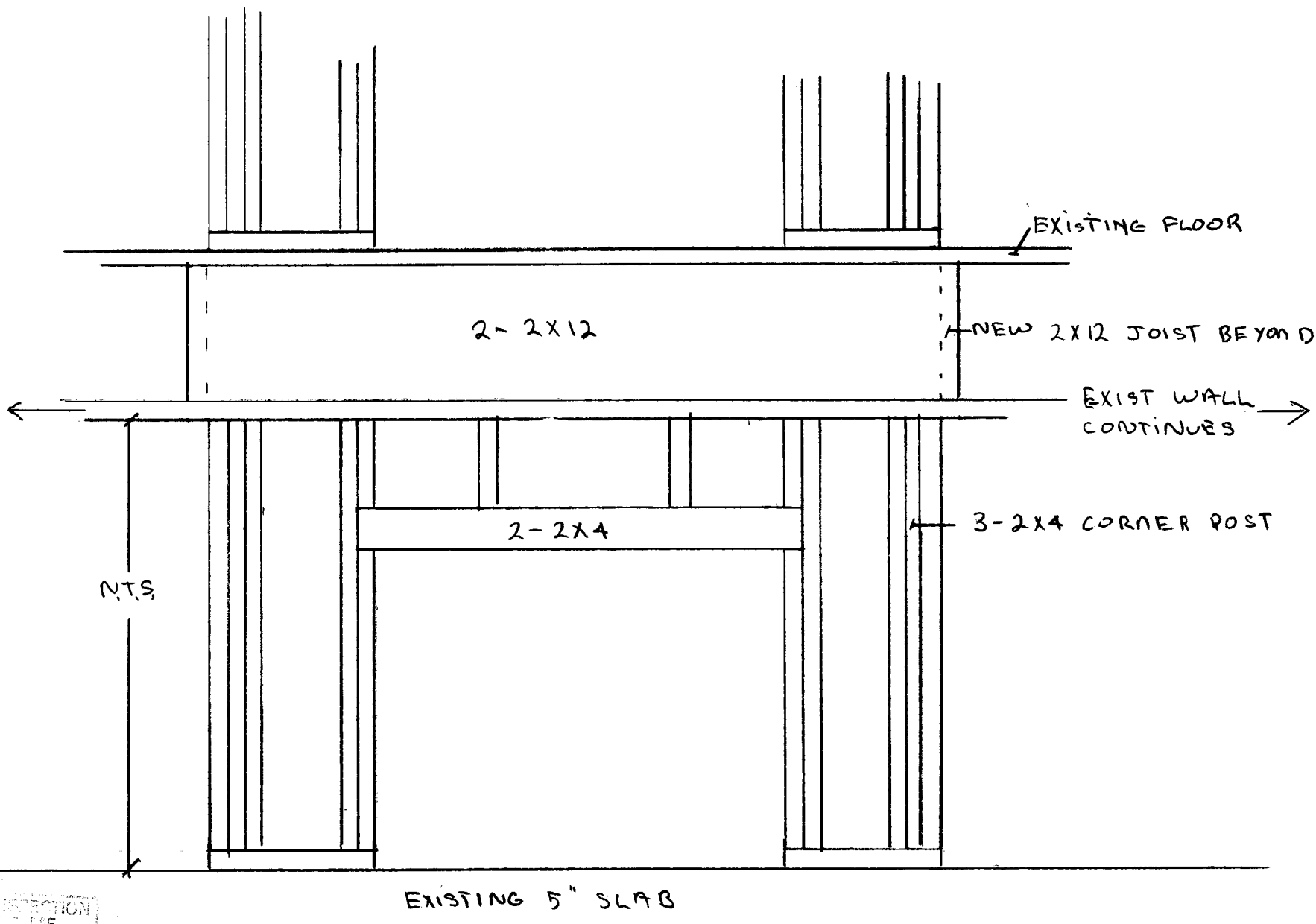
IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>[Signature]</u>	Date: <u>Dec 28, 2001</u>
--	---------------------------

This is not a permit, you may not commence ANY work until the permit is issued

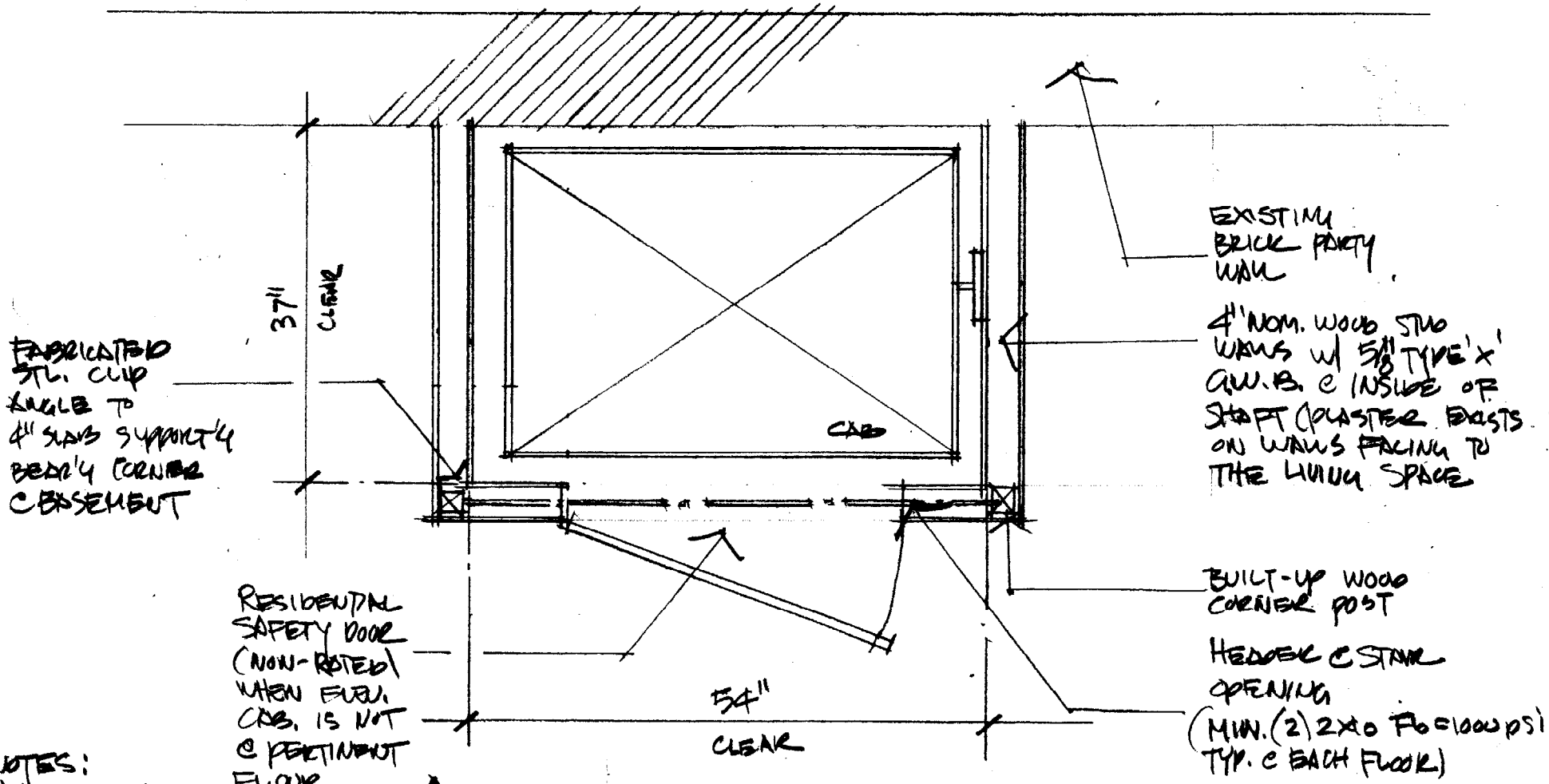
DEC 28 2001



DEPT. OF BUILDING INSPECTION
 CITY OF PORTLAND
 MAR 27 2002

1" = 1'

NORRIS RESIDENCE
 96 PARK STREET



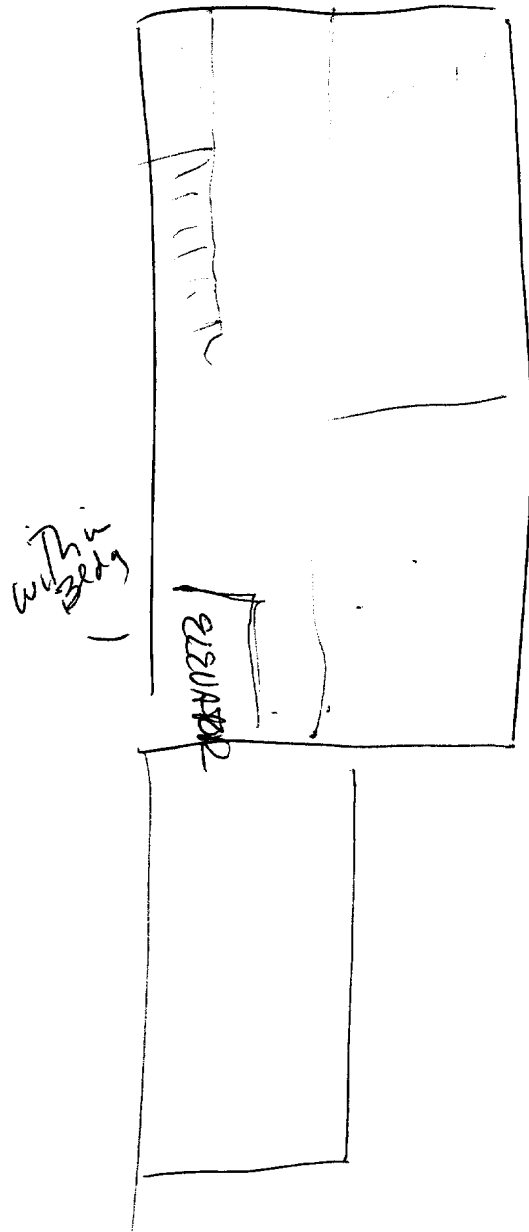
- NOTES:**
1. WORK INCLUDES THE RETROFIT OF A RESIDENTIAL ELEVATOR WITHIN AN EXISTING HOUSE
 2. MANUFACTURER: VER-TRAN
 3. STORIES: FIVE
 4. THE ELEVATOR SHAFT IS CONSTRUCTED OF LIMITED COMBUSTIBLE G.W.B. & PLASTER AND IS NOT FIRE RATED PER NFPA 101, CHAPTER 21 FOR SINGLE FAMILY RESIDENCES. THE ELEVATOR HAS A GATE ONLY AS PART OF THE CAB WHICH IS NOT PROTECTED NOR IS THE SHAFT VENTED.

**ELEVATOR
SHAFT
PLAN**

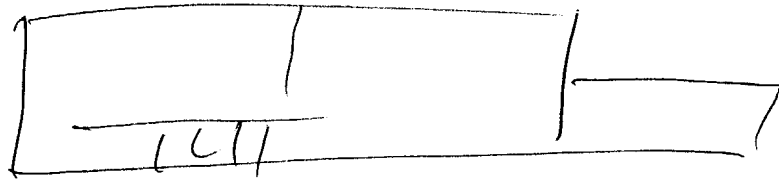
DATE: 12/17/01 3/4" = 1'-0"

Norris/ Coyne Residence
96 Park Str.
Portland

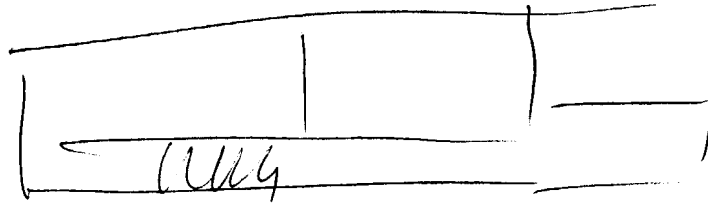
PARK ST



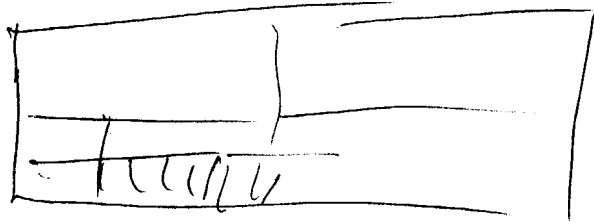
1st



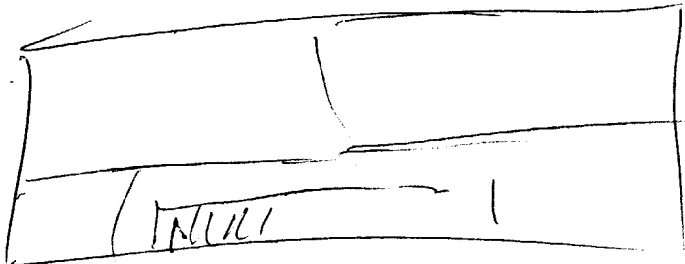
2nd



3rd



4th



Inspection Services
Michael J. Nugent
Manager



Housing & Neighborhood Services
Mark Adelson
Director

CITY OF PORTLAND

February 28, 2002

Robert Norris
306 Delano Park
Cape Elizabeth, Maine 04107

RE: 96 Park Street
Permit: 01-1563
CBL: 045-B-023

Dear Mr. Norris;

Permit # 01-1563 is DENIED in accordance to section 108.1 of the BOCA Code 1999 edition. Additional information that was required by Michael Nugent, Inspection Manager on February 11, 2002 was not submitted to this office, which would include structural details and clarification of use.

You may re-apply at a later date, however the permit will be reviewed as a "new application".

Enclosed you will find your submissions.

The business hours are 8:00 a.m. to 4:00 p.m. weekdays.

Sincerely,

Jodine L. Adams
Office Manager

Inspection Services
Michael J. Nugent
Manager



Housing & Neighborhood Services
Mark Adelson
Director

CITY OF PORTLAND

February 28, 2002

Robert Norris
306 Delano Park
Cape Elizabeth, Maine 04107

RE: 96 Park Street
Permit: 01-1563
CBL: 045-B-023

Dear Mr. Norris;

Permit # 01-1563 is DENIED in accordance to section 108.1 of the BOCA Code 1999 edition. Additional information that was required by Michael Nugent, Inspection Manager on February 11, 2002 was not submitted to this office, which would include structural details and clarification of use.

You may re-apply at a later date, however the permit will be reviewed as a "new application".

Enclosed you will find your submissions.

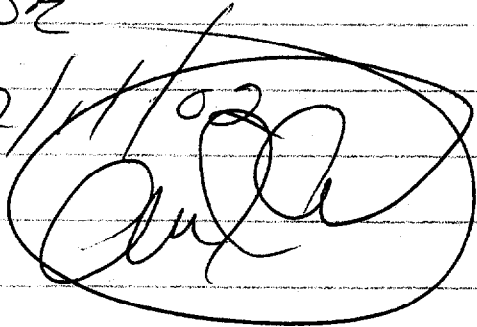
The business hours are 8:00 a.m. to 4:00 p.m. weekdays.

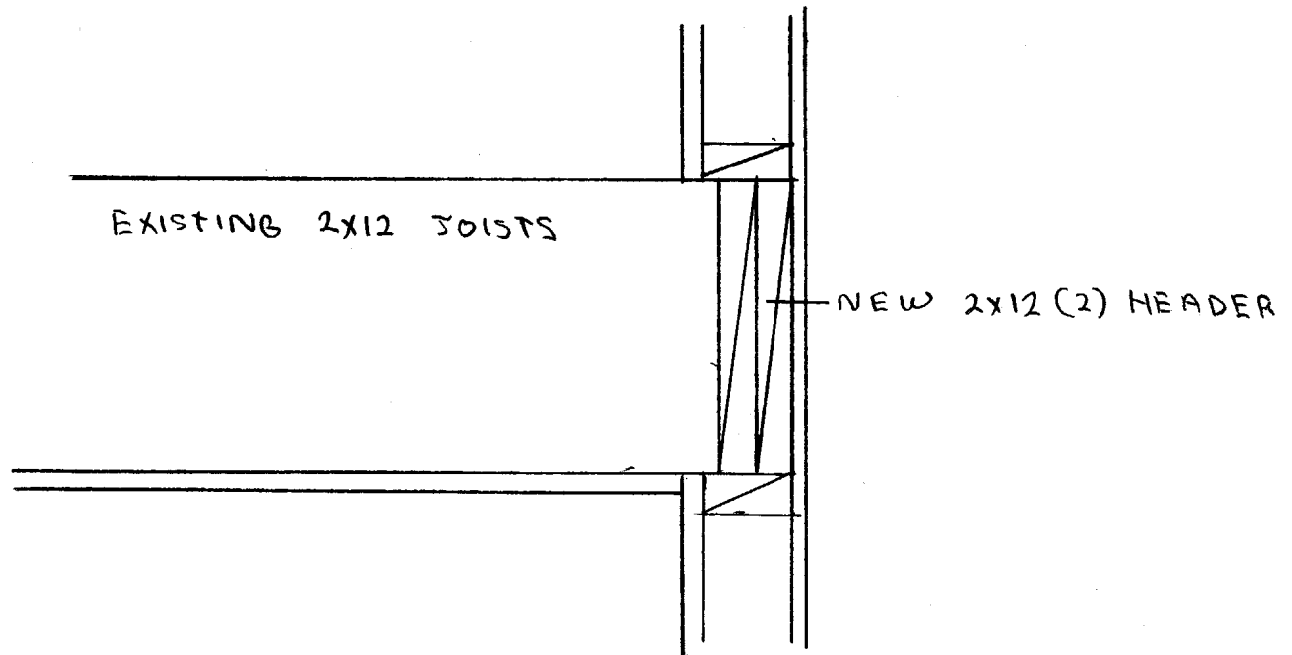
Sincerely,

Jodine L. Adams
Office Manager

ADVISED OWNER
OF NEED
FOR
STRUCTURAL
DETAILS

&
CLARIFICATION
OF
USE

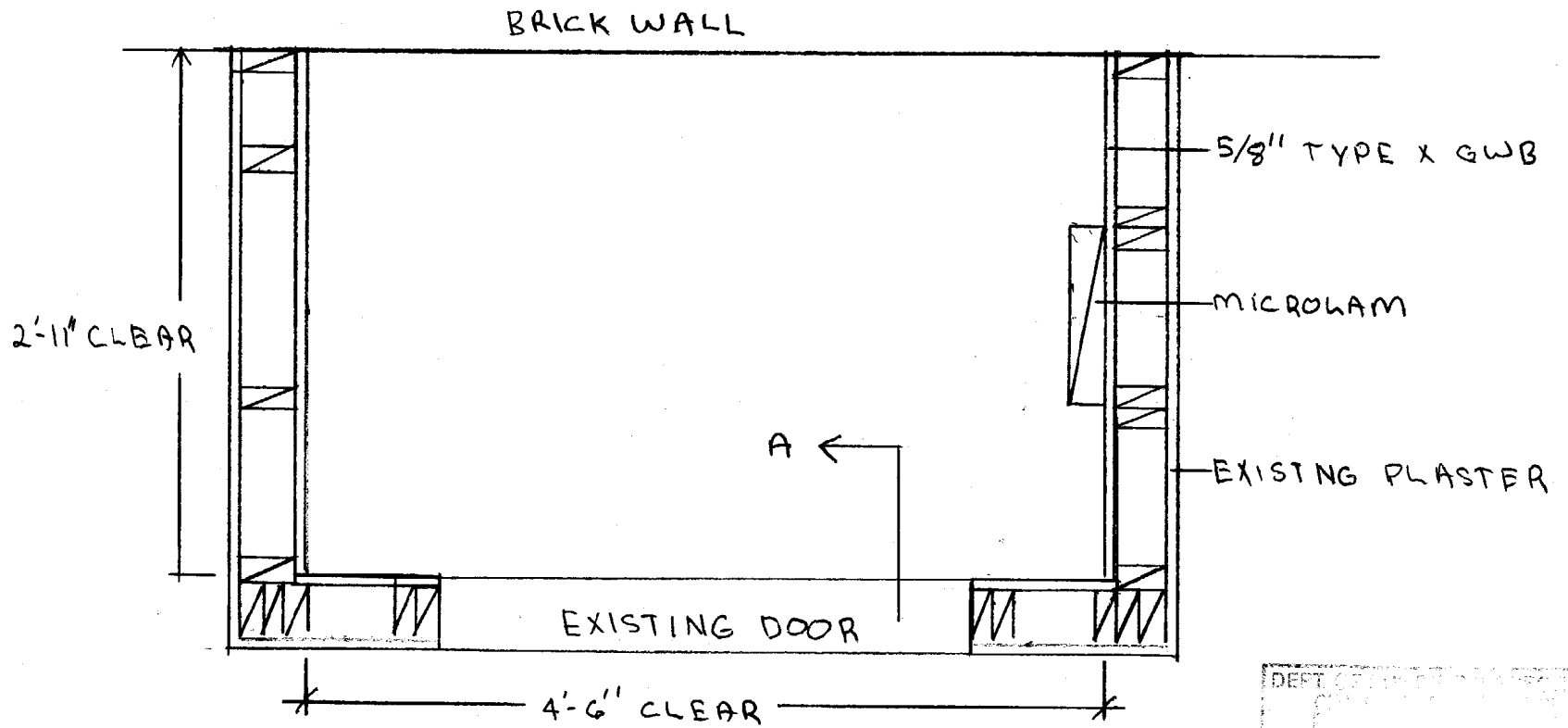
2/11/20




SECTION A
TYPICAL ALL FLOORS

MAR 1 9 2000

NORRIS RESIDENCE
90 PARK STREET



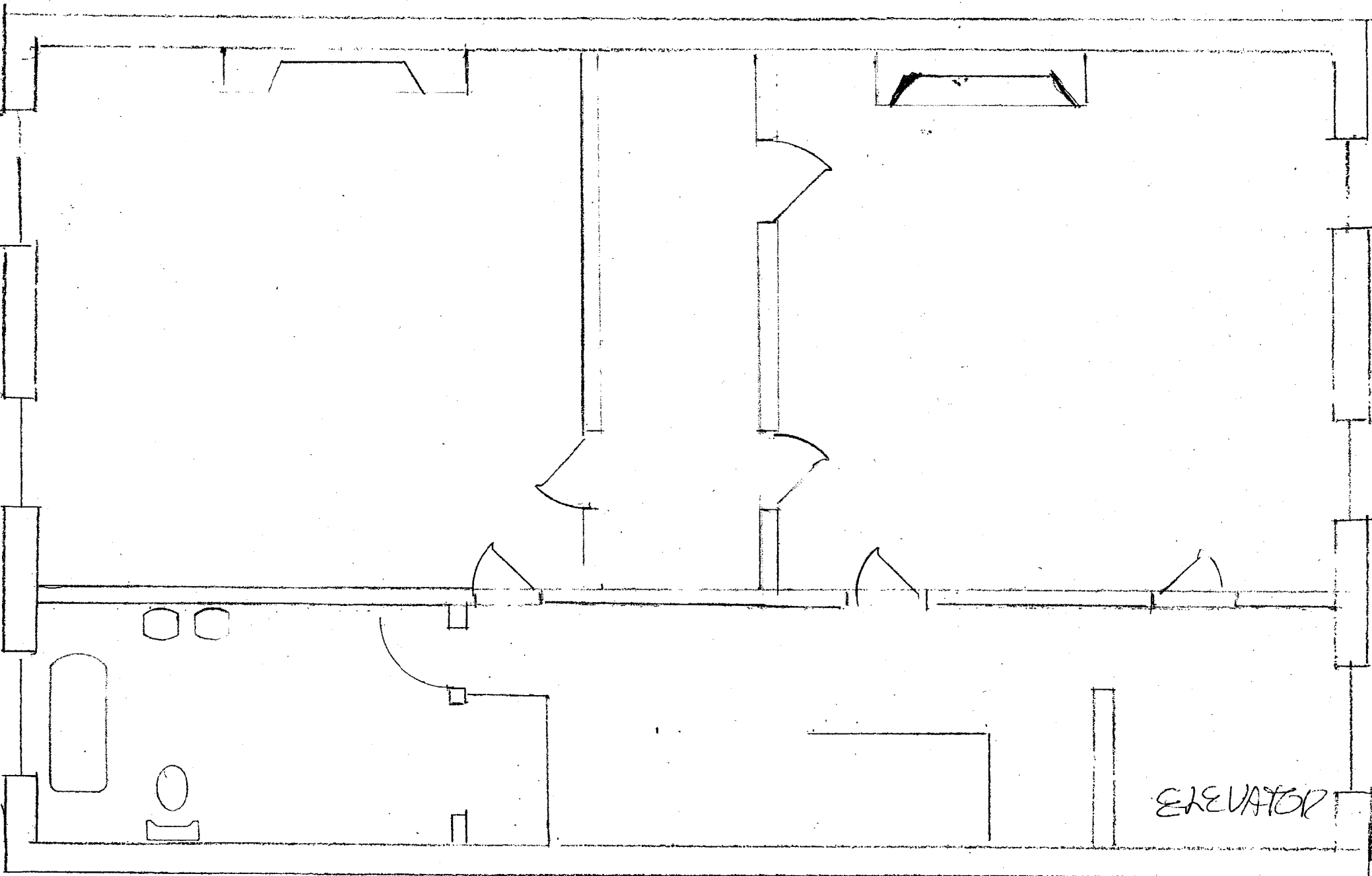
ELEVATOR SHAFT
WALL FRAMING
(TYPICAL)

1" = 1'

DEPT. OF PUBLIC WORKS
MAR 19 2002

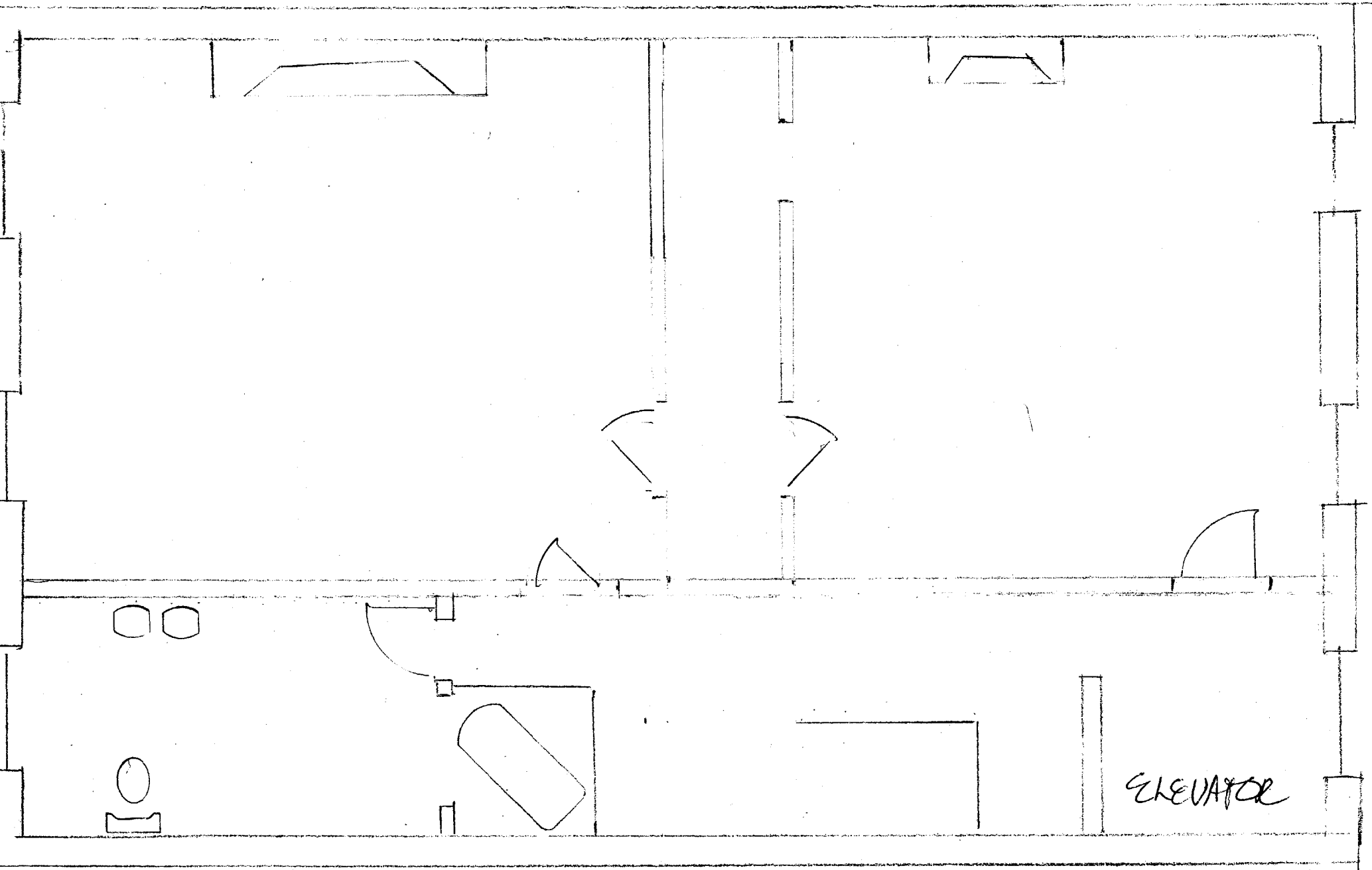
NORRIS RESIDENCE
96 PARK STREET

3rd FLOOR



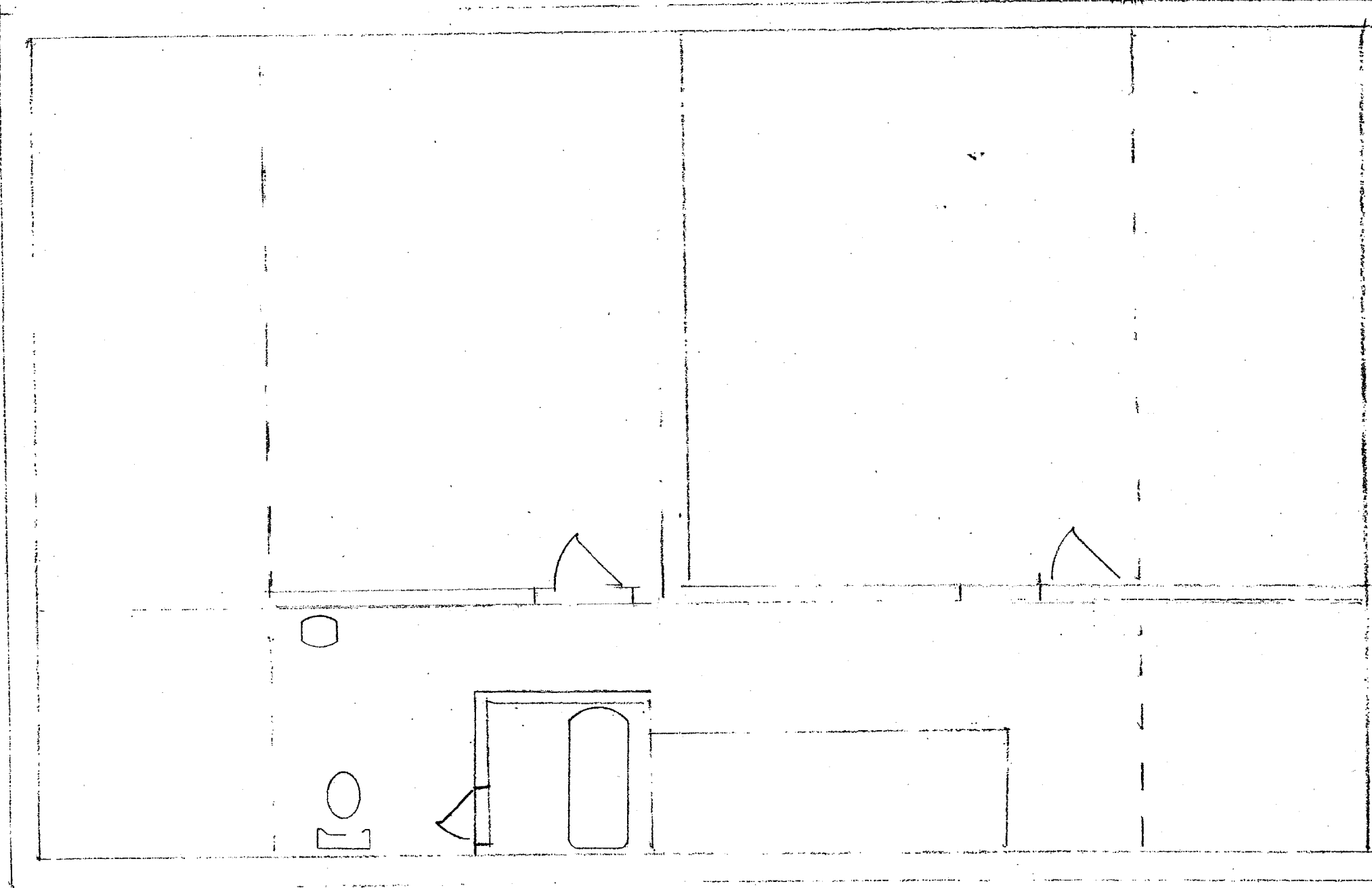
4TH FLOOR

MAR 19 2009



5TH FLOOR

MAR 19 2002



SHOP DRAWING NAME

NORRIS RESIDENCE

ARCHITECT

GENERAL CONTRACTOR

EQUIPMENT INSTALLED BY

VER-TRAN, INC.
P.O. BOX 8
NORWAY, ME 04268

SPECIFICATIONS

6 LANDING
"ELEVETTE" 3400
CD2200

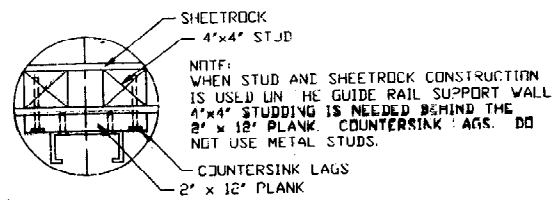
CAR 42"Dx31"Wx6'-5"H OVERALL DIMS.
CDDF(S) 4
CAPACITY 500 LBS. AT 30 F.P.M.
2 CABLES 5,700 LBS. T.S. IMP. PLOW
STEEL 1/4" x 8 x 19 IWRC
CAR CONSTRUCTION 3/4" HRDWD VENEER
COLOR/PANEL. SFL.FCTION NATURAL JAK
SEMI GLOSS

- A.L. DOORS INTERLOCKED - EM4
- SOUND BASE
- MACHINE LIMIT
- PHONE CORD
- PHONE RFX - BRASS STAINLESS
- FOLDING GATE
- COLLAPSIBLE GATE FIN. - ANOD. BRASS
- GATE SAFETY BAR
- D.A. GATE LOCK
- ACCORDIAN FOLD GATE
- CAR CONTROL PLATE FIN. - POL. BRASS
- REMOTE PLATES FINISH - POL. BRASS
- C.O.P. HEIGHT - STD. CHWHEELCHAIR
- LIGHTED BUTTONS
- IN USE LIGHT
- ARRIVAL LIGHTS
- KEYSWITCH IN CAR
- STANDARD ALARM
- EMERGENCY LIGHT AND BELL
- CONSTAN PRESSURE
- DOOR OPEN ALARM
- HOMING DEVICE
- LAMP FIXTURE - NORA, STANDARD
- AUTO CAB LIGHT
- HANDRAIL - BRASS
- VINYL FLOOR
- STABILIZER
- HALF TROLLEY
- SOLID STOP
- BUFFER SPRING 06" 012"
- BATTERY BACKUP

- NOTES:
1. NOTICE TO ELECTRICAL CONTRACTOR: BRING 4 MID WIRES TO DISCONNECT SWITCH AND GROUND; (2) 20V. (240PWR), (1) 20V. (LIGHT), (1) NEUTRAL.
 - 1 1/2 H.P. MOTOR 240 VOLTS 1 PHASE 60 CYCLE
 - 10 AMPS R.J.N 50 AMPS START 30 AMP MAIN LINE FUSE
 2. NOTICE TO G.C.
 - ALL HOISTWAY AND MACHINE ROOM CONSTRUCTION MUST COMPLY WITH NATIONAL, STATE, AND LOCAL CODES. PLEASE ADVISE INCOA OF ANY CHANGES NEEDED TO THE DRAWING FOR COMPLIANCE IN YOUR AREA.
 3. SWING TYPE SHAFT DOORS BY U.HERS.
 4. NOTICE TO ELEVATOR CONTRACTOR OR HIS REPRESENTATIVE: ALL ELECTRICAL WIRING MUST BE DONE BY A JOURNEYMAN MECHANIC AND MUST MEET NATIONAL, STATE, AND LOCAL CODES.

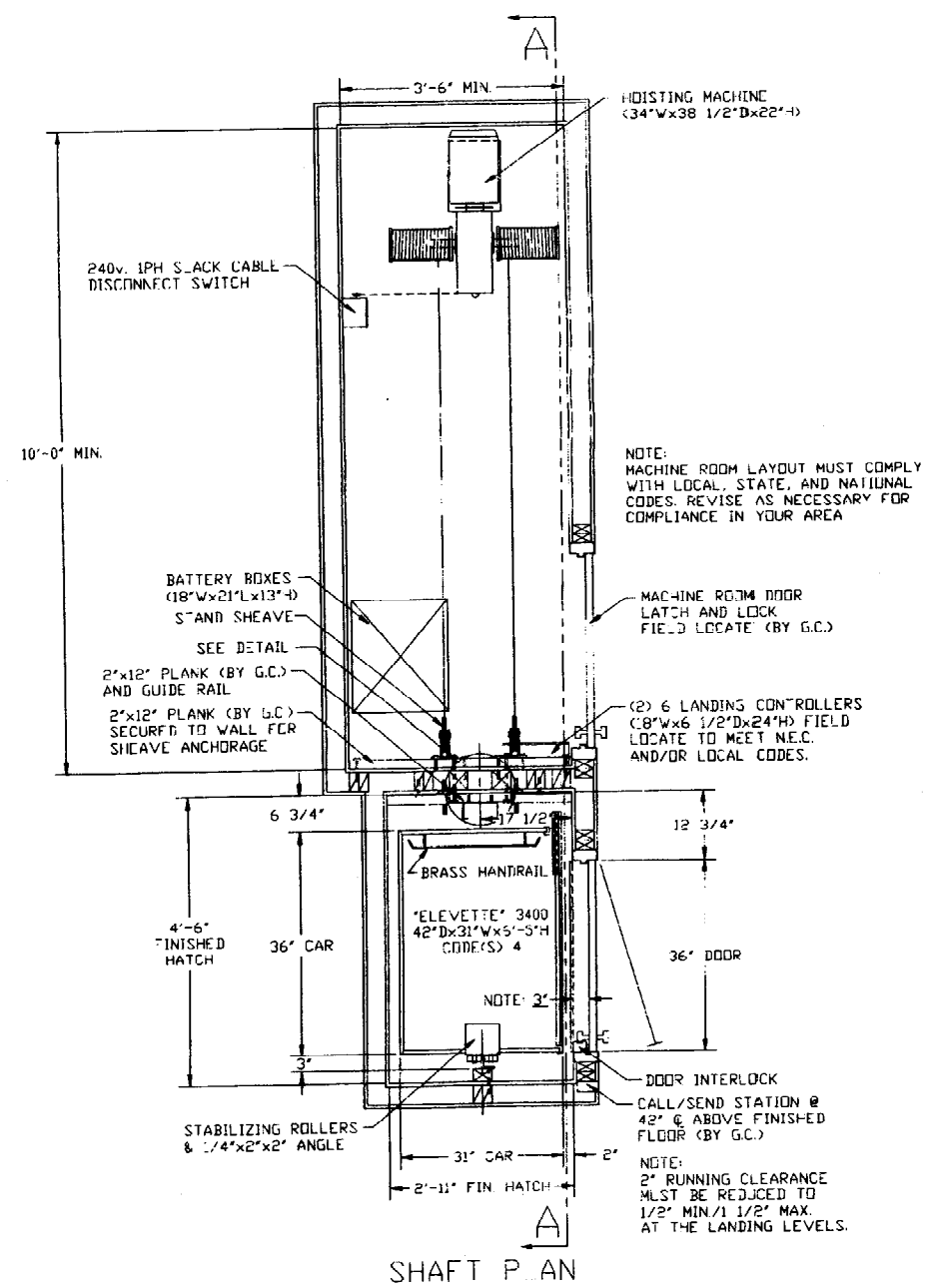
INCOA JOB# 02-00790
DEALER P.O.#
DRAWN BY: T. WOODWARD
DATE: 2/25/02

DRAWING IDENTIFICATION NUMBER
5127



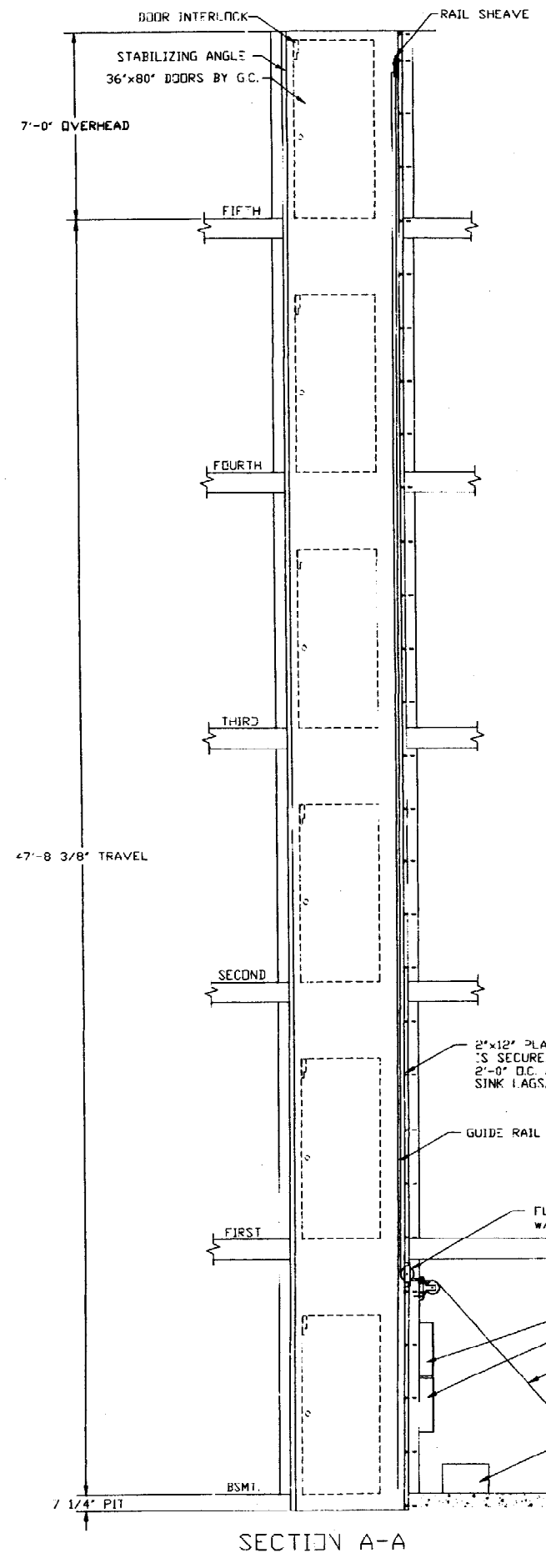
DETAIL

- NOTES:
1. DO NOT BUILD RETURN WALLS AND HEADER TO ALLOW FOR INSTALLATION OF CAR.
 2. MACHINE ROOM AND HOISTWAY TO BE FIRE-RATED AS PER LOCAL CODE REQUIREMENTS, WITH SELF-CLOSING B LABEL DOORS. MACHINE ROOM DOOR TO HAVE A STOREROOM TYPE LOCKSET.
 3. PLANK FOR RAIL ATTACHMENT TO BE MICROLAM, AND INSTALLED BY OTHERS.
 4. MACHINE ROOM TO HAVE A LIGHT, GFCI RECEPTACLE AND FIRE EXTINGUISHER (TYPE ABC).
 5. DISCONNECT FOR ELEVATOR TO BE 3 POLE WITH AUXILIARY CONTACT FOR BATTERY LOWERING. MUST BE FUSED AND LOCKABLE, 240V.

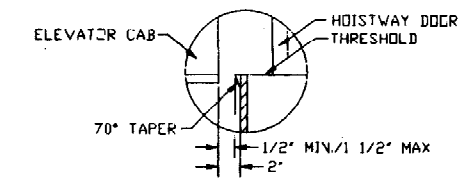


SHAFT PLAN

- TECHNICAL DATA:
1. REACTIONS ON ALL SHEAVES AND MOUNTINGS
STATIC = 1,100 LBS.
IMPACT = 2,200 LBS.
 2. FASTENING OF HOISTING MACHINE TO CONCRETE
1/2" x 3" H.L.T.I. BOLTS (OR EQUAL)
 3. RAIL FASTENING TO 2'x12" PLANK
#14 x 1 3/4" TYPE A S.M.S. RAIL IS PRE-DRILLED AT FACTORY.
 4. BOLT FASTENING OF CAR TO TROLLEY
1/2" - 13 x 4" SOCKET HD CAP SCREWS

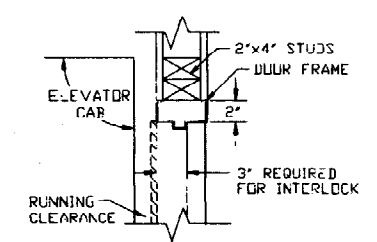


SECTION A-A

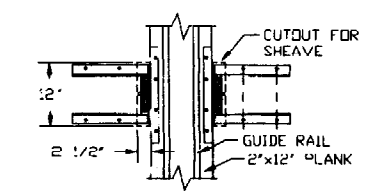


DOOR SILLS TO BE INSTALLED BY G.C. AFTER LIFT SUPPLIER HAS INSTALLED A RUNNING PLATFORM. SILL TO BE BROUGHT OUT TO NOT LESS THAN 1/2" AND NOT MORE THAN 1 1/2" TO THE RUNNING PLATFORM.

SILL DETAIL



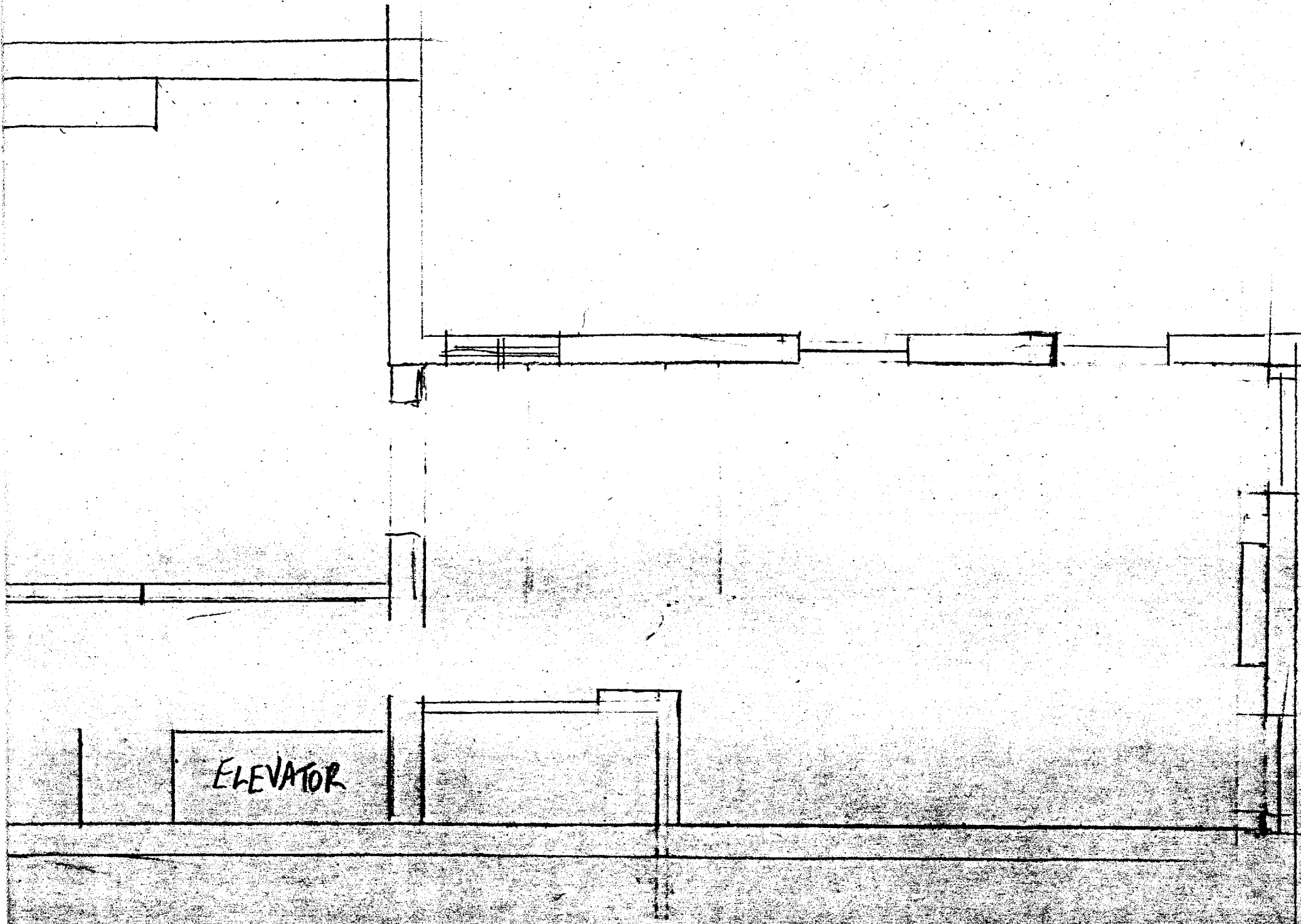
DOOR FRAME DETAIL



CUTOUT DETAIL

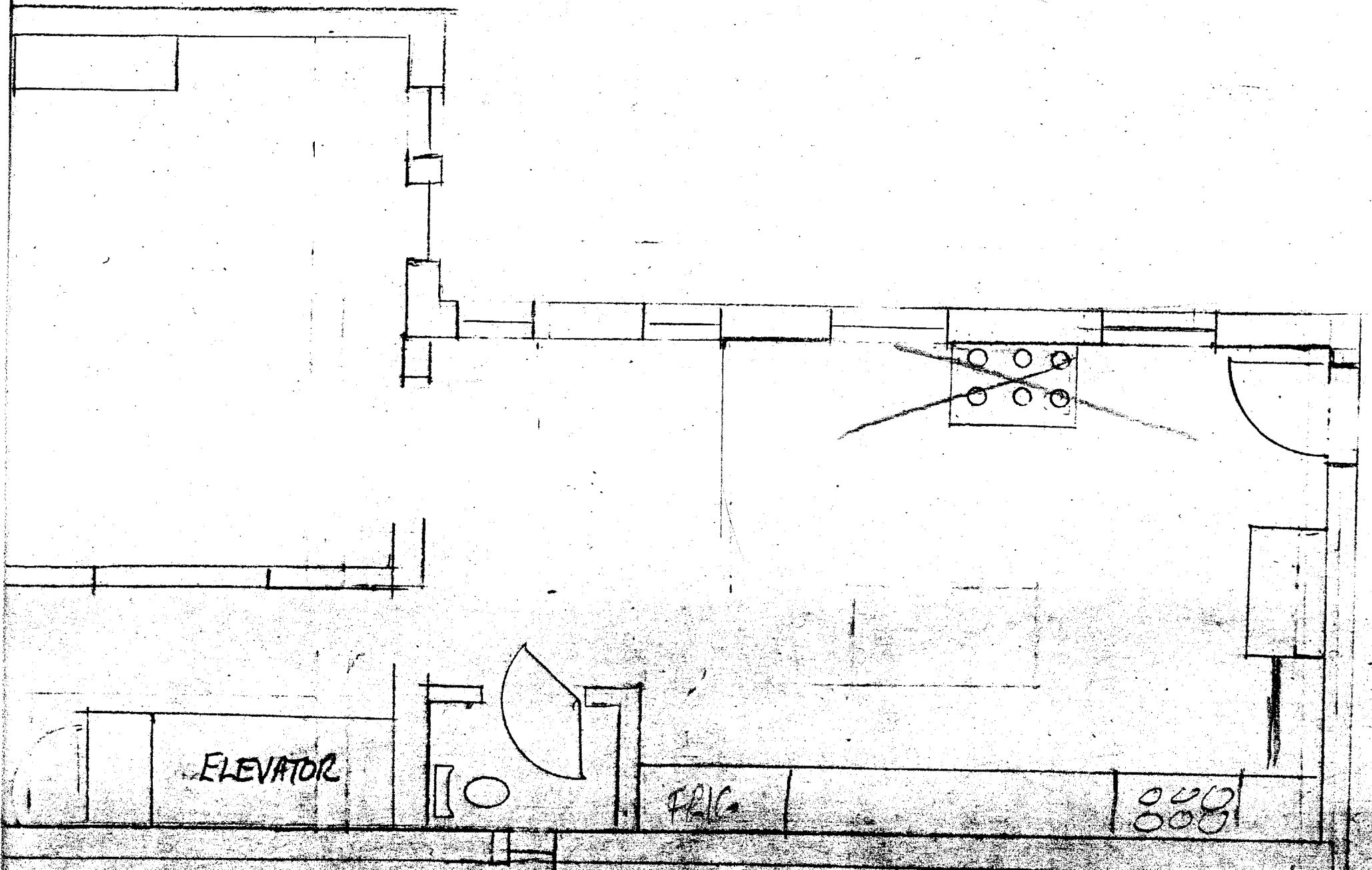
RE: 96 PARK STREET 11x17 COPY

FLOOR



Paint Pot - Pool Area 3600 1/2 gal

DR



ELEVATOR

PLG

000
000

DUPLICATE

GENERAL RECEIPT

CITY OF PORTLAND, MAINE

DEPARTMENT Inspections DATE 12/31/01

RECEIVED FROM: Maureen-Carne (Unit)

ADDRESS 5th Hill St

UNIT	ITEM	REVENUE CODE	DOLLAR AMOUNT
	<u>Bulky</u>		<u>144.00</u>
	<u>Over # 1430</u>		
	<u>CB 2 045</u>	<u>2</u>	<u>234.10</u>

CASH CHECK OTHER

TOTAL 378.10

RECEIVED BY _____